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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/581,616			ing Date 19/2006	☐ To be Mailed
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
FOR			IUMBER FI	.ED NU	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		ı	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A	1	N/A		ı	N/A	
	EXAMINATION FE (37 CFR 1,16(o), (p),		N/A		N/A		N/A		l	N/A	
TO' (37	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *		l	x s = 1		OR	x s =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 = *			l	X \$ =			X \$ =	
APPLICATION SIZE FEE (37 CFR 1.16(e))  If the specification and sheets of paper, the at is \$250 (\$125 for smal additional 50 sheets of 35 U.S.C. 41(a)(1)(G)					on size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									ı		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	L
APPLICATION AS AMENDED – PART II         OTHER THAN           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR         SMALL ENTITY											
AMENDMENT	07/11/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (S)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	· 14	Minus	·· 20	= 0	ı	X \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 2	Minus	3	= 0	ı	X \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))								_		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					П	1		OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus		=		X \$ =		OR	x s =	
№	Independent (37 CFR 1 16(h))		Minus	***	-	l	x s =		OR	x s =	
Į.	Application Size Fee (37 CFR 1.16(s))								l		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
TOTAL ADDL FEE									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write 0" in column 3.  *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1 in the paid of the paid o											

This collection of information is required by 37 CFR 11.6. The information is required to obtain or retain a benefit by the public which is to file (and by the DSF) process) an application. Confidentially 35 opened by 36 opene